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COVER LETTER

Department of State **Division of Corporations** P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: Carla's Cottage Resale Shoppe, Inc (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for:

\$70.00 Filing Fee

\$78.75

Filing Fee & Certificate of

Status

□\$78.75

Filing Fee & Certified Copy \$87.50

Filing Fee, Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

CD/\M∙	Carla	Connelly	
rkina			

Name (Printed or typed)

20545 Independence Blvd, Ste G

Address

Groveland, FL 34736

City, State & Zip

407-968-2075

Daytime Telephone number

carlascottageresale@gmail.com

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION
In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME The name of the corporation shall be: Carla's Cott	age Resale Shoppe, Inc
ARTICLE II PRINCIPAL OFFICE	15 MAR 27 111-2:13
Principal street address: 20545 Independence Blvd	Mailing address; if different is: A. PO Box 604
Suite G	Mascotte, FL 34753
Groveland, FL 34736	
	ourpose of the corporation is exlusively for charitable conmental purposes under Section 501 (c)(3)
of the Internal Revenue code or corresp	onding Section of any future federal tax code.
Upon the dissolution of this organization	assets shall be distributed for one or more
exempt purposes within the meaning of Section	n 501 (c)(3) of the Internal Revenue code, or
corresponding section of future tax code or sha	all be distributed to the federal government
or to a state or local governmen	nt for public purpose.
ARTICLE IV MANNER OF ELECTION The manner of the bylaws ARTICLE V INITIAL OFFICERS AND/OR DIRE	ner in which the directors are elected and appointed:
4062 Lake Bluff Drive	Name and Title: Madelyn Thomas / Secretary 6506 Bywood Drive Orlando, FL 32810
1062 Lake Bluff Drive	Name and Title:Address:
Name and Title:N AddressA	

Name and Title:	Name and Title:	
Address	Address:	
		
Name and Title:	Name and Title:	
Address	Address:	
	Audiess.	
_		
ARTICLE VI	REGISTERED AGENT orida street address (P.O. Box NOT acceptable) of the registered agent is:	
	Carla Connelly	
Name:	4062 Lake Bluff Drive	
Address:		
• .	Mascotte, FL 34753	
·		
ARTICLE VII The name and add	INCORPORATOR dress of the Incorporator is:	
Name:	Carla Connelly	
Address:	4062 Lake Bluff Drive	
Address.	Mascotte, FL 34753	
	ned as registered agent to accept service of process for the above stated corporation at the place designated i	n this
certificate, it am fa	uniliar with and accept the appointment as registered agent and agree to act in this capacity	
Cula	Required Signature of Registered Agent 5 7 7 7 7 7 7 7 7 7 7 7 7	
I submit this docur	ment and affirm that the facts stated herein are true. I am aware that any false information submitted in a doci	ument
to the Department	of State constitutes a third degree felony as provided for in s.817.155, F.S.	
- W	Required Signature of Incorporator Required Signature of Incorporator Required Signature of Incorporator	
	vicigation Signature of inequolitator	

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Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: Carla's Cottage Resale Shoppe, Inc

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution.

Description of information that must be included in a claim:

Voluntarily dissolving the Profit Corporation. We have no intentions of revoking the dissolution and now release the name to the Non-Profit to conduct business as a charitable organization under the same name of Carla's Cottage Resale Shoppe, Inc, according to the 501(c)(3) code of the Internal Revenue Service.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

Carla's Cottage Resale Shoppe, Ir	1C
PO Box 604	
Mascotte, FL 34753	

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Carla Connelly

Printed Name of the Person Filing

Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00